

THE IKK NF- κ B SYSTEM: A TREASURE TROVE FOR DRUG DEVELOPMENT

Michael Karin*, Yumi Yamamoto[‡] and Q. May Wang[‡]

Nuclear factor- κ B (NF- κ B)/Rel transcription factors have been suspected since their discovery to play a pivotal role in chronic and acute inflammatory diseases. It now seems that aberrant regulation of NF- κ B could also underlie autoimmune diseases and different types of cancer. Recently, NF- κ B and the signalling pathways that regulate its activity have become a focal point for intense drug discovery and development efforts. Given the large number of major ailments in which aberrant regulation of NF- κ B has been observed or is suspected, such efforts seem well justified. This review will discuss recent progress in the development of drugs that inhibit NF- κ B activation, and consider their potential applications in inflammatory and autoimmune diseases, as well as cancer.

ANKYRIN

A type of protein structural motif composed of a helix-turn-helix that mediates protein-protein interactions.

PHOSPHORYLATION

A type of protein modification involving the covalent addition of phosphate groups to serine, threonine or tyrosine residues.

*Laboratory of Gene Regulation and Signal Transduction Department of Pharmacology, School of Medicine, University of California, San Diego, 9500 Gilman Drive, La Jolla, California 92093-0636, USA.

[‡]Lilly Research Laboratories, Eli Lilly and Company, Indianapolis, Indiana 46285, USA.

e-mails: KarinOffice@ucsd.edu; qmwang@lilly.com
doi:10.1038/nrd1279

The nuclear factor- κ B (NF- κ B) proteins are a small group of closely related transcription factors, which in mammals consists of five members: Rel (also known as c-Rel), RelA (also known as p65 and NF- κ B3), RelB, NF- κ B1 (also known as p50) and NF- κ B2 (also known as p52). All five proteins have a Rel homology domain (RHD), which serves as their dimerization, DNA-binding and principal regulatory domain¹ (FIG. 1). The RHD contains at its C terminus a nuclear-localization sequence (NLS), which is rendered inactive in non-stimulated cells through binding of specific NF- κ B inhibitors, known as the I κ B proteins¹. The I κ Bs use a core domain composed of six to seven ANKYRIN repeats to bind to the RHD and thereby mask the NLS. Interestingly, NF- κ B1 and NF- κ B2 are initially made as the larger precursors p105 and p100, respectively². The two precursors are in essence an RHD fused through its C terminus to an auto-inhibitory I κ B-like domain¹. So the two precursors, which can dimerize with the different Rel proteins, are trapped in the cytoplasm and can therefore function both as reservoirs for the mature p50 and p52 subunits and as I κ Bs. Usually, p105 undergoes constitutive (non-regulated) processing to p50, causing the release of dimers containing the p50 subunit, which translocate to the nucleus unless met by another I κ B protein. Unlike p105, which is not particularly selective

in its choice of partners, p100 is found in the cytoplasm mostly dimerized with RelB³. Furthermore, unlike p105, p100 is subjected to regulated, signal-dependent processing that results in the preferential release of p52-RelB dimers⁴ (FIG. 2).

Activation of most forms of NF- κ B, especially the most common form — the p50-RelA dimer — depends on PHOSPHORYLATION-INDUCED UBIQUITINATION of the I κ B proteins (FIG. 2). This sequential modification depends on two protein complexes: the I κ B kinase (IKK) complex and the E3^{IKB} ubiquitin ligase complex². Once poly-ubiquitinated, the I κ Bs undergo rapid degradation through the 26S proteasome and the liberated NF- κ B dimers translocate to the nucleus, where they participate in transcriptional activation of specific target genes⁴. The IKK complex is composed of three subunits: the catalytic subunits IKK- α and IKK- β , and the regulatory subunit IKK- γ (also known as NEMO)⁵. Gene-disruption experiments indicate that IKK activity and classical NF- κ B activation are absolutely dependent on the integrity of IKK- γ ⁶. Interestingly, however, IKK- γ is not required for activation of the alternative NF- κ B signalling pathway, which leads to nuclear translocation of p52-RelB dimers⁷. Of the two catalytic subunits, the most important for activation of the classical NF- κ B signalling

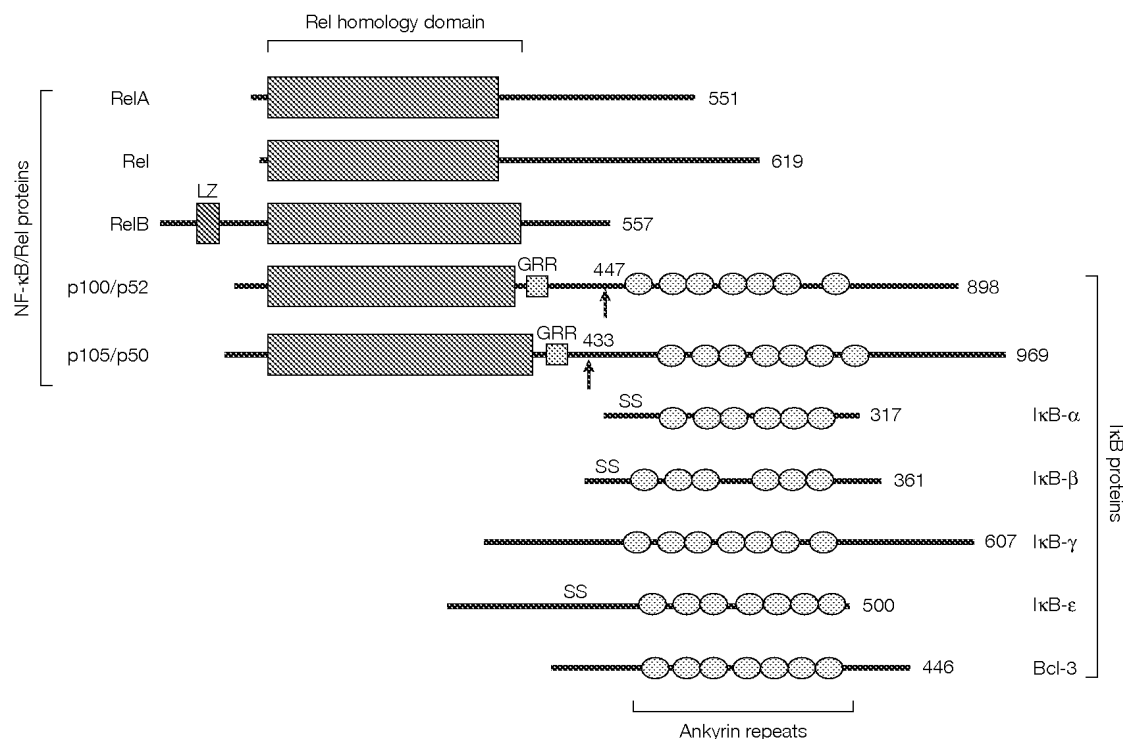


Figure 1 | Schematic structure of NF-κB and IκB proteins. The NF-κB proteins are related to each other by the presence of the c-Rel homology domain (RHD, red box) whereas IκB proteins share six to seven ankyrin repeats (AR, blue beads). The ARs of the inhibitors dock onto the RHDs of the NF-κB proteins and cause their cytoplasmic retention. In the case of the p105 and p100 precursors, these interactions can occur intramolecularly or with the RHD of the partner to which the precursor is bound. GRR, glycine-rich repeat; IκB, inhibitor of NF-κB; LZ, leucine zipper; NF-κB, nuclear factor-κB; SS, two conserved serines in IκB.

pathway is IKK-β^{8–10}. Interestingly, cells lacking IKK-α show normal induction of NF-κB DNA-binding activity in response to most stimuli^{11,12}. Nonetheless, IKK-α is required for activation of NF-κB DNA-binding activity in response to engagement of receptor activator of NF-κB (RANK), a member of the tumour-necrosis factor (TNF) receptor (TNFR) family¹³. Recent experiments indicate that IKK-α might also contribute to induction of NF-κB-dependent gene expression in fibroblasts stimulated with TNF-α, by acting as a histone H3 kinase¹⁴. However, mice that lack IKK-α kinase activity do not show any major defects that are consistent with aberrant activation of NF-κB target genes in response to TNF-α¹³. Therefore the histone kinase activity of IKK-α might be required only in certain cell types, such as fibroblasts¹⁵. As discussed below, the inhibition of IKK-α activity does not have the same pathophysiological outcomes as the inhibition of IKK-β activity.

IKK-α kinase activity, however, is indispensable for activation of the alternative NF-κB signalling pathway (FIG. 2), as it is essential for inducible p100 processing^{4,7,16}. This function of IKK-α cannot be provided by IKK-β, despite the close structural similarity between the two catalytic subunits. Another unique function of IKK-α is its role in the induction of keratinocyte differentiation¹². This function, however, does not depend on the protein kinase activity of IKK-α, its ability to bind IKK-γ or the activation of NF-κB¹².

Recent experiments, based on the use of conditional IKK-β loss-of-function mutations, indicate that IKK-β activity is required for the inactivation of a severe inflammatory reaction that leads to multi-organ failure in response to ischaemia-reperfusion¹⁰. IKK-β activity is also required for protection of a large number of different cell types from apoptosis¹⁷. These results indicate that IKK-β inhibitors could be useful for the treatment of inflammatory diseases^{1,18,19}; however, an expected side effect inherent to such inhibitors would be increased susceptibility to the induction of programmed cell death. As such, a more likely application for IKK-β inhibitors could be in cancer therapy^{20,21,22}. As previously discussed, there is ample circumstantial evidence that a variety of tumours, both solid and of haematological origin, use constitutive activation of NF-κB to suppress their susceptibility to both inherent and drug-induced apoptosis¹⁷. Inhibition of IKK-α activity, however, can be expected to have different results. For instance, mice in which IKK-α has been rendered inactivatable show defective RANK signalling, but normal TNFR1 signalling¹³. These mice, termed *Ikk-α^{ΔA}* mice, also exhibit normal innate immunity but defective development of secondary lymphoid organs, and defective humoral response (antibody production) to T-cell-dependent antigens¹⁶. These findings indicate that selective IKK-α inhibitors might be useful for inhibiting OSTEOCLAST formation, which depends on RANK signalling, and for preventing B-cell-mediated autoimmune diseases.

UBIQUITINATION

A type of protein modification involving the covalent addition of ubiquitin, a small protein, to lysine groups. Poly-ubiquitination targets proteins for degradation.

OSTEOCLASTS

Bone-degrading cells, derived from macrophages.

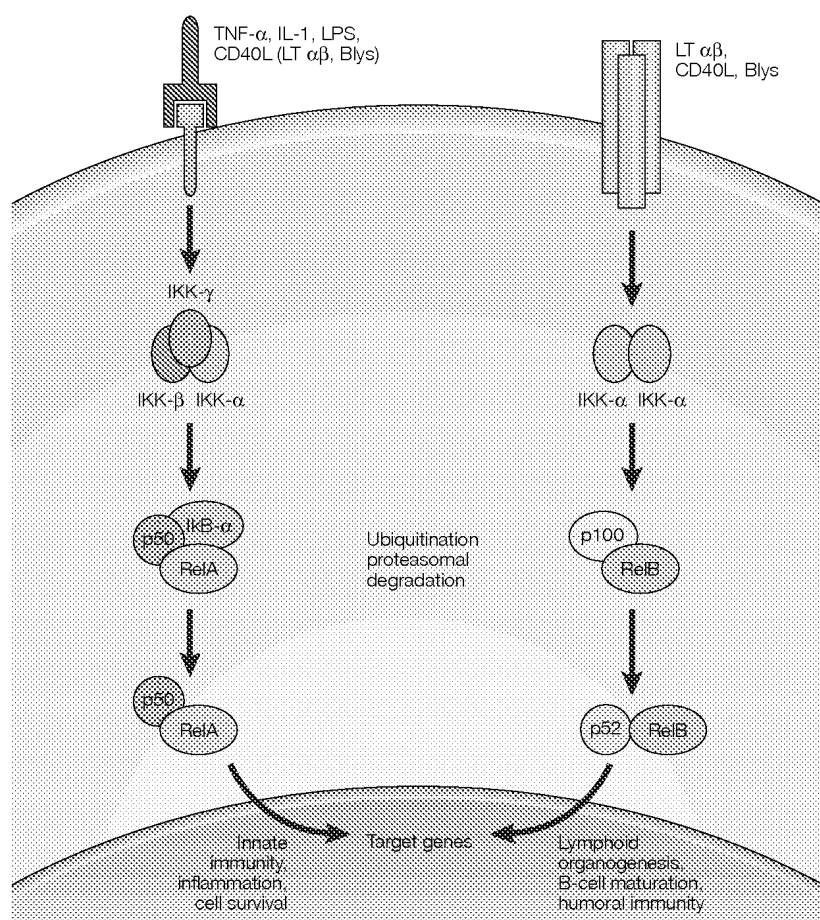


Figure 2 | Schematic representation of the two NF- κ B signalling pathways. The classical pathway is depicted on the left. It is activated by TNF- α , IL-1, LPS, CD40L (LT $\alpha\beta$, Blys) and to a lesser extent by lymphotoxin α/β (LT α/β) and Blys/BAFF. Activation of this pathway depends on the three-subunit IKK holocomplex, which phosphorylates I κ Bs to induce their degradation. This pathway is crucial for the activation of innate immunity and inflammation, and for inhibition of apoptosis (increased cell survival). The alternative pathway is depicted on the right. It is activated by LT α/β , CD40L and Blys/BAFF, but not by TNF- α , IL-1 or LPS. Activation of this pathway depends on IKK- α homodimers, which induce processing of p100 and nuclear translocation of RelB-p52 dimers. This pathway is crucial for secondary lymphoid organ development, maturation of B cells and adaptive humoral immunity (that is, the production of high-affinity antibodies). I κ B, inhibitor of NF- κ B; IKK, I κ B kinase; IL, interleukin; LPS, lipopolysaccharide; NF- κ B, nuclear factor- κ B; TNF, tumour-necrosis factor.

Strategies for inhibiting NF- κ B

One can envision several different strategies for inhibiting NF- κ B activation or function. One possibility is interfering with the binding of NF- κ B to DNA. Although this can be accomplished through the use of decoy κ B sites or their analogues, such molecules are quite large and polar, properties which are likely to hinder their cellular uptake and bioavailability. Given the large interaction surface mediating the binding of NF- κ B to DNA, it is quite unlikely that small, non-polar molecules that specifically block NF- κ B DNA binding can be found. The same logic applies for molecules that inhibit the dimerization of NF- κ B proteins.

A strategy that is more likely to succeed is to interfere with the process of NF- κ B activation. Indeed, inhibitors of the 26S proteasome were shown to inhibit I κ B degradation and NF- κ B nuclear translocation²³, as well as

inducible p100 processing²⁴. At least one proteasome inhibitor, bortezomib (Velcade; Millenium), has entered clinical development for the treatment of myeloma²⁵. Nonetheless, it is not clear whether the therapeutic effects of bortezomib are due to inhibition of I κ B degradation (and NF- κ B activation) or to inhibition of other targets. After all, the proteasome is involved in the degradation of all poly-ubiquitinated proteins. A higher degree of specificity might be expected from inhibitors of the E3 ubiquitin ligases and the E2 ubiquitin-conjugating enzymes responsible for the phosphorylation-dependent poly-ubiquitination of I κ Bs and p100 (REF 8). However, even these enzymes are involved in the poly-ubiquitination of several targets, and their inhibition is unlikely to result in very specific inhibition of NF- κ B activation. For instance, the E3^{I κ B} complex has also been implicated in the degradation of β -catenin^{26–28}. As accumulation of β -catenin can promote neoplastic transformation^{29,30}, inhibition of E3^{I κ B} activity might not offer the best approach for inhibiting NF- κ B activation.

Given the genetic analysis described above, the most effective and selective approach for inhibition of NF- κ B activation might be offered by inhibitors of IKK activity. So far there is little evidence that either IKK- α or IKK- β phosphorylate proteins that are not involved in NF- κ B signalling. In addition, with the exception of the involvement of IKK- α in keratinocyte differentiation, all of the phenotypes caused by loss of IKK- α or IKK- β function can be attributed to defective activation of either the alternative or the classical NF- κ B signalling pathway. Therefore, both IKK- α and IKK- β have been pursued by many groups as targets for the development of therapeutic agents to be used for the treatment of cancer, as well as inflammatory and metabolic diseases (BOX 1). The following sections summarize recent progress in the development of agents that specifically inhibit IKK enzymatic activity, and also discuss improvements in our understanding of the action of older drugs, such as non-steroidal anti-inflammatory drugs (NSAIDs), which recent data indicate function as nonspecific IKK inhibitors.

Non-steroidal anti-inflammatory drugs

With the growing understanding of the importance of NF- κ B in regulating the inflammatory process, the function of conventionally used anti-inflammatory agents has been re-evaluated and shown to be due, at least partially, to interference with the IKK–NF- κ B system. In this section, we will discuss recent evidence for the ability of immunomodulating drugs to inhibit activation of IKK and/or NF- κ B (BOX 1).

Several NSAIDs are capable of inhibiting NF- κ B activation. These agents include aspirin and salicylates^{31–33}, sulindac and its analogues^{34–36}, and sulphasalazine and its metabolites^{37–39}. The most commonly accepted mechanism by which NSAIDs exert their anti-inflammatory activities is by inhibition of cyclooxygenases (COX), which are essential for the production of PROSTAGLANDINS. However, the effects of these agents on the NF- κ B pathway are independent of COX inhibition, as suggested by the fact that indomethacin, a potent inhibitor of

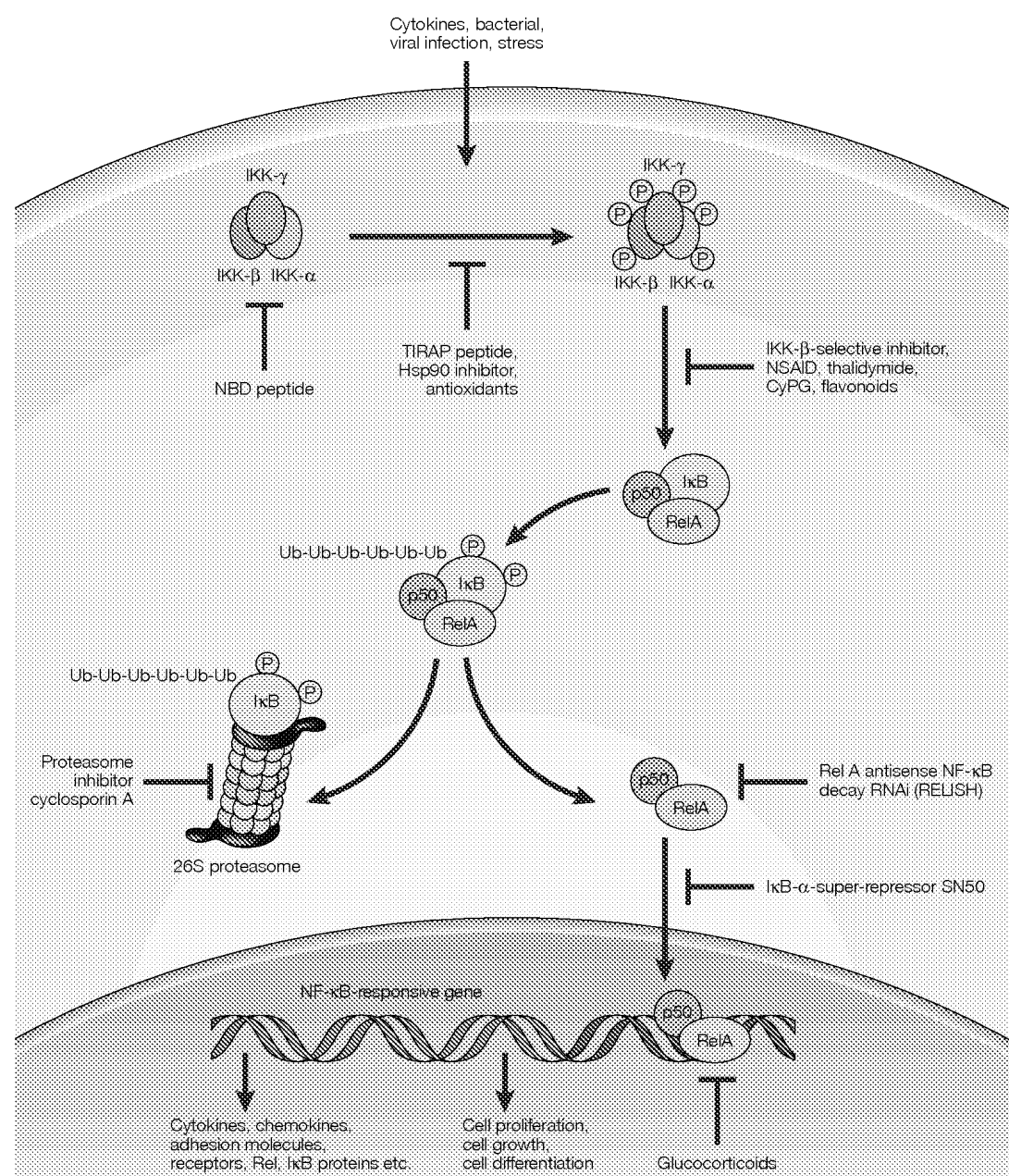
PROSTAGLANDINS
Derivatives of arachidonic acid (a fatty acid) that can trigger various physiological responses, including inflammation and pain.

prostaglandin synthesis, does not inhibit the NF- κ B pathway^{33,34}. Aspirin and sodium salicylate inhibit TNF- α -induced endothelial expression of the adhesion

molecules vascular cell adhesion molecule-1 (VCAM-1) and intercellular adhesion molecule-1 (ICAM-1) (REF. 32), which are encoded by NF- κ B target genes. Treatment

Box 1 | Other tools to interfere with the NF- κ B pathway

Although major efforts to develop inhibitors of the nuclear factor- κ B (NF- κ B) pathway in the pharmaceutical industry have focused on selective IKK- β inhibitors, there are a number of other different potential approaches. As summarized in the figure, targets of these approaches can be categorized into seven different groups on the basis of unique events in regulation of NF- κ B proteins: regulation of NF- κ B protein expression and binding to DNA (RelA antisense, NF- κ B decoy and RNAi); interference with the formation of the IKK complex (NBD peptide, which corresponds to the IKK- γ -binding domain of IKK- β); blockade of IKK- β activation process (TIRAP peptide, which corresponds to the Toll-interleukin-1 receptor (TIR) domain-containing adapter domain (TIRAP), Hsp90 inhibitor: Hsp90 stabilizes RIP proteins that are the components of the TNF- α receptor signalling complex and antioxidants); inhibitors of IKK- β kinase activity; proteasome inhibitors; NF- κ B nuclear translocation inhibitors (I κ B- α super-repressor and SN50: a peptide consisting of the nuclear localization sequence (NLS) of the p50 NF- κ B subunit); and last, inhibitors of NF- κ B transcriptional activity (glucocorticoids). Given the diverse processes involved in regulation of the NF- κ B pathways, a better basic understanding of these crucial signalling pathways will ultimately lead to new avenues in the development of efficient and clinically useful inhibitors.



of endothelial monolayers with sodium salicylate also inhibits the transendothelial migration of leukocytes³², which depends on VCAM-1 and ICAM-1 expression. Such findings indicate that part of the anti-inflammatory properties of salicylates can be accounted for by inhibition of the NF- κ B pathway. Furthermore, aspirin and sodium salicylate are competitive inhibitors of the ATP-binding site of IKK- β , thereby impairing the phosphorylation of I κ Bs and subsequent activation of NF- κ B³³.

Sulindac, which is structurally related to indomethacin, and its derivatives (sulindac sulphide and sulindac sulphone) are also able to bind IKK- β and inhibit its catalytic activity and thereby prevent NF- κ B activation in response to TNF- α stimulation³⁴. In the colon cancer cell line HCT-15, which is defective in prostaglandin synthesis, sulindac, and to a lesser extent aspirin, enhance TNF- α -mediated apoptosis, suggesting that the pro-apoptotic response seen in these cells is independent of COX inhibition³⁷. Sulindac also blocks TNF- α -induced NF- κ B DNA binding, potentiates TNF- α -mediated cell killing in pulmonary carcinoma cell lines³⁵, and suppresses tumour growth of gastric carcinoma cells in nude mice³⁶. These data indicate that treatment with sulindac in combination with cytokines that both induce apoptosis and activate the NF- κ B pathway might result in enhanced cell death.

Sulphasalazine, another NSAID that is widely used to treat inflammatory bowel disease, is cleaved following oral administration to 5-amino-salicylic acid (5-ASA) and sulphapyridine. The treatment of human colonic epithelial cells with sulphasalazine, but not 5-ASA or sulphapyridine, prevents NF- κ B activation through blocking I κ B phosphorylation and degradation in response to TNF- α , lipopolysaccharide (LPS) or phorbol esters³⁷. However, in a more recent study, 5-ASA was shown to block NF- κ B activation by inhibiting both IKK- α and IKK- β kinase activity in mouse colonic cells³⁸. This discrepancy might simply result from different permeability or uptake of 5-ASA in different cells. Mesalamine, a related aminosalicylate, can block the phosphorylation of p65 without affecting I κ B degradation³⁹. Although the effects of sulphasalazine and its metabolites are partially contradictory, these data indicate that these agents can block the NF- κ B activation pathway at multiple steps.

Immunomodulatory drugs

Thalidomide and its analogues, which are known as immunomodulatory drugs (IMiDs), have anticancer, anti-inflammatory, anti-angiogenic and immunosuppressive effects that are achieved by modulating the levels of cytokines, including TNF- α , interleukin-6 (IL-6), IL-12 and vascular endothelial growth factor (VEGF). Recently, these agents, including IMiD CC-5013 (Phase III for multiple myeloma and metastatic melanoma) and IMiD CC-4047 (Phase I/II for multiple myeloma and prostate cancer)⁴⁰, have shown promise in clinical trials for the treatment of different cancers. Among several different hypotheses, the inhibition of NF- κ B activation has been proposed to explain the therapeutic activity of thalidomide and related agents⁴¹.

In endothelial cells, thalidomide prevents the degradation of I κ B- α by inhibiting IKK- β , which is consistent with its role in inhibiting cytokine-induced NF- κ B activation⁴¹. The inhibitory effect of thalidomide on TNF- α and H₂O₂-induced NF- κ B activation is also seen in other cell types, including T lymphocytes, and myeloid and epithelial cells⁴². IMiD-induced apoptosis in multiple myeloma cells is associated with downregulation of NF- κ B DNA-binding activity, as well as the reduced expression of NF- κ B-dependent proteins, including the cellular inhibitor of apoptosis protein 2 (c-IAP-2) and FLICE inhibitory protein (c-FLIP)⁴³. Therefore, a portion of the immunosuppressive effects of thalidomide might be due to inhibition of NF- κ B activation.

Cyclopentenone prostaglandins (cyPGs) are naturally occurring prostaglandin metabolites⁴⁴. These molecules are synthesized during the late phase of an inflammatory response and are thought to be key regulators in the resolution of inflammation. The anti-inflammatory activity of CyPGs has been attributed to their ability to inhibit NF- κ B activation or activity. This effect could be partly due to the ability of cyPGs to activate the peroxisome proliferation-activated receptor- γ (PPAR- γ), which has been shown to antagonize NF- κ B transcriptional activity⁴⁵. The treatment of peritoneal macrophages with the cyPG 15-deoxy- $\Delta^{12,14}$ -prostaglandin J₂ (15d-PGJ₂) inhibits the expression of inducible nitric oxide synthase (iNOS), as well as NF- κ B activity in a PPAR- γ -dependent manner. The synthetic PPAR- γ ligand BRL-49653 can also inhibit NF- κ B activity. However, cyPGs can directly inhibit activation of NF- κ B pathway by blocking IKK- β activity⁴⁶.

Both 15d-PGJ₂ and PGA₁ inhibit I κ B- α degradation through inhibition of IKK activity by direct covalent modification of IKK- β at cysteine 179 within its activation loop. Cysteine residues in the DNA-binding domain of p50 and p65 might also be targets of cyPGs⁴⁷. The substitution of these cysteines with serines abolishes the inhibitory effects of 15d-PGJ₂ on NF- κ B DNA binding, suggesting that modification of p50 and/or p65 by cyPGs might be important for the inhibition of NF- κ B activation. Interestingly, NF- κ B might be involved not only in the onset of inflammation, but also in its resolution by being able to activate genes encoding both pro- and anti-inflammatory mediators⁴⁸. For example, NF- κ B activity is associated with increased iNOS expression during the onset of inflammation, whereas in the late phase of this process NF- κ B activation is associated with expression of COX2, which directs the synthesis of anti-inflammatory cyPGs⁴⁸. As such, the inhibition of NF- κ B by cyPGs might be part of a negative-feedback loop that contributes to the resolution of inflammation.

Dietary supplements and herbs are commonly used to reduce the risk of atherosclerosis, neurodegenerative disorders and cancer. Several studies have recently suggested that the potential benefits of these agents might result from inhibition of the NF- κ B signalling pathways along one or several steps in their activation cascade. Antioxidants, including vitamin C^{49,50}, and flavonoids^{51,52} are examples of such agents. Antioxidants can reduce the balance of reactive oxygen species (ROS) generated by

phagocytic leukocytes during chronic and acute inflammatory diseases or by environmental stresses⁵³. It was initially reported that oxidative stress enhances the expression of pro-inflammatory genes regulated by NF- κ B, and that NF- κ B activation can also increase the levels of intracellular ROS. However, recent reports show that inhibition of NF- κ B activation actually promotes ROS production⁵⁴ and that ROS might not play a crucial role in NF- κ B activation⁵⁵. Therefore the mechanism of antioxidant action is far from being clearly understood.

Nevertheless, the administration of the antioxidant *N*-acetyl-L-cysteine (NAC) suppresses LPS-induced NF- κ B activity and neutrophilic alveolitis in rats⁵⁶. Vitamin C inhibits TNF- α - and IL-1 β -induced IKK phosphorylation of I κ B- α and subsequent NF- κ B DNA binding in endothelial cell lines⁴⁹. The inhibitory effect of vitamin C is relieved by treatment with a p38 mitogen-activated protein kinase (MAPK) inhibitor, suggesting that vitamin C enhances the activity of p38 MAPK and apparently exerts an indirect negative regulatory effect that acts between the TNF- α receptor and IKK complex⁴⁹. In a study of dehydroascorbic acid (DHA), which is the oxidized form of ascorbic acid generated in the biosynthetic pathway of vitamin C, suppression of TNF- α -induced NF- κ B activation was proposed to result from the direct inhibition of IKK- β kinase activity independent of p38 MAPK⁵⁰. It is important to realize that antioxidants can also inhibit the activity of other components of NF- κ B signalling pathways, including TNF receptors and the proteasome, without exerting any direct effect on IKK⁵⁴.

Flavonoids are naturally occurring phenolic compounds that are ubiquitous in plants, and which have been used to suppress inflammation, prevent the development of cancer and protect against vascular disease. Several studies demonstrate that flavonoids mediate their effects by inhibiting NF- κ B signalling^{51,52}. For example, resveratrol inhibits expression of iNOS and decreases nitric oxide production in activated macrophages, which is associated with inhibition of LPS-induced I κ B- α phosphorylation and the NF- κ B DNA-binding activity⁵¹. Resveratrol is also able to induce apoptosis in Rat-1 cells by inhibiting Ras-mediated activation of NF- κ B⁵². These results indicate that at least some of the biological activities of flavonoids are mediated by inhibition of NF- κ B pathways. It remains to be examined, however, whether flavonoids act as direct IKK inhibitors.

The re-evaluation of the function of commonly used anti-inflammatory and dietary agents illustrates that inhibition of the NF- κ B pathway could be an important part of their therapeutic efficacy, as well their potential toxicity. A better understanding of the target specificity, and the determination of the serum levels of these agents required for inhibition of NF- κ B signalling, will allow a more rational use of these agents. In addition, greater knowledge of the molecular determinants used by these compounds to inhibit IKK or other components of the NF- κ B pathway should provide clues for the development of more specific and efficacious NF- κ B inhibitors.

Development of selective IKK inhibitors

A major effort towards the development of selective IKK or NF- κ B inhibitors has been undertaken by the pharmaceutical industry. Much of this effort entails the screening of large compound libraries, or the use of combinational chemistry, to identify inhibitors of IKK- α and/or IKK- β catalytic activities. No potent IKK- α -specific inhibitors have been described to date. This might stem, in part, from an incomplete understanding of the role for IKK- α in NF- κ B activation. Several compounds, which are summarized in TABLES 1 and 2, can inhibit IKK- α kinase activity in the low micromolar range, although these agents were initially identified as IKK- β inhibitors. The unique role of IKK- α in the activation of the alternative pathway, which is important for B-cell-mediated responses, and the recent demonstration of the auxiliary role of IKK- α in the classical pathway, indicate that IKK- α might be an attractive target for therapeutic intervention in autoimmune diseases and cancer^{13,14,16,57}. It is therefore anticipated that recent developments in the understanding of the IKK- α -dependent alternative pathway⁴ will provide better cell-based assays for the identification of IKK- α -selective inhibitors.

By comparison, the development of specific IKK- β inhibitors has progressed rather rapidly. Although most IKK- β inhibitors reported so far are still in pre-clinical stages of development, a number of novel small-molecule inhibitors of IKK- β have been disclosed (TABLES 1 and 2). For example, SPC-839 (compound 1), a member of a series of quinazoline analogues developed by Celgene^{58–60}, is one of the more extensively studied IKK- β inhibitors. SPC-839 inhibits IKK- β with an IC₅₀ of 62 nM, and has a 200-fold selectivity for IKK- β over IKK- α (IC₅₀ = 13 μ M). This compound also inhibits IL-6 and IL-8 production in Jurkat T cells. When tested in animal models, SPC-839 blocks TNF- α production in LPS-challenged rats at 10 mg per kg and reduces paw oedema in a rat arthritis model at 30 mg per kg^{59,60}.

Several groups have reported the inhibition of IKK- β activity by β -carboline derivatives^{61–63}. Of these, PS-1145 (compound 2), which was developed from a β -carboline natural product that inhibited several different kinases⁶², has been extensively evaluated in various *in vitro* assays by different groups^{61–63}. PS-1145 inhibits the IKK complex with an IC₅₀ of 150 nM, blocks TNF- α -induced I κ B phosphorylation and degradation in HeLa cells, and reduces the production of TNF- α in LPS-challenged mice⁶². In a separate study, PS-1145 was shown to interfere with NF- κ B activation, abrogate cytokine production and secretion, and inhibit cell proliferation when tested in multiple myeloma cells⁶³.

Another well-studied molecule that inhibits IKK- β is BMS-345541 (compound 3), along with its related analogues^{64,65}. BMS-345541 shows greater than tenfold selectivity for IKK- β (IC₅₀ = 0.3 μ M) over IKK- α (IC₅₀ = 4 μ M) and fails to inhibit a panel of 15 other cellular protein kinases at concentrations as high as 100 μ M. Unlike other reported IKK inhibitors, BMS-345541 was found to bind at an allosteric site of IKK- β , and so behaves as an ATP-non-competitive inhibitor⁶⁵.

In addition, this molecule inhibits LPS-induced production of several cytokines, including TNF- α , IL-1, IL-6 and IL-8 in THP-1 monocytic cells, with IC₅₀ values in

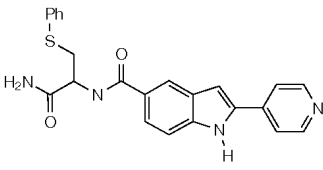
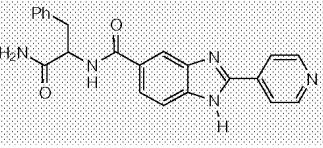
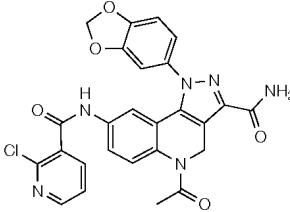
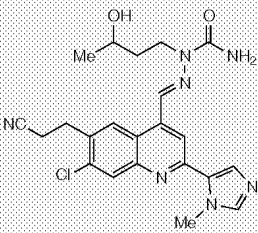
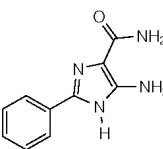
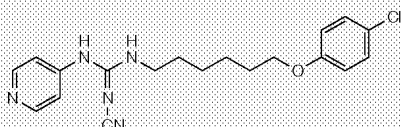
the range 1–5 μ M⁶⁵. When tested in LPS-challenged mice, BMS-345541 blocked TNF- α production, measured in the serum of animals, with an EC₅₀ of approximately 10

Table 1 | **Summary of selective IKK inhibitors in development**

Structure	Name	Comments	References
	Compound 1 (SPC-839) Quinazoline analogue	<ul style="list-style-type: none"> • Reversible ATP-competitive inhibitors • IC₅₀ = 62 nM for IKK-β • IC₅₀ = 13 μM for IKK-α • IC₅₀ = 8 nM (NF-κB luciferase assay in Jurkat cells) • Inhibition of IL-2 and IL-8 production in Jurkat cells • Inhibition of NF-κB activation in LPS-challenged rat at 10 mg per kg • Paw oedema reduction in rat arthritis model at 30 mg per kg 	58–60
	Compound 2 (PS-1145) β -carboline analogue	<ul style="list-style-type: none"> • IC₅₀ = 0.15 μM for IKK-β • IC₅₀ = 5 μM (NF-κB activation in HeLa cells) • Inhibition of ICAM-1 transcription in primary cells • Reduction of TNF-α in LPS-challenged mice 	61–63
	Compound 3 (BMS-345541) Imidazoquinoxaline derivative	<ul style="list-style-type: none"> • IC₅₀ = 0.3 μM for IKK-β • IC₅₀ = 4.0 μM for IKK-α • IC₅₀ = 4 μM (IκB phosphorylation in cell-based assay) • Reduction of TNF-α in LPS-challenged mice • Effective in murine arthritis model 	64–66
	Compound 4 (SC-514) Amino-thiophenecarboxamide derivative	<ul style="list-style-type: none"> • IKK-β inhibitor (IC₅₀ = 2.7–11.2 μM) • Selective over IKK-α (IC₅₀ >200 μM) and other kinases • Reversible ATP-competitive inhibitors • Blockade of IL-6, IL-8 and COX2 expression in cells (IC₅₀ = 6–20 μM) • Inhibition of TNF-α production in LPS-challenged mice 	67,68
	Compound 5 Ureido-thiophenecarboxamide derivative	<ul style="list-style-type: none"> • IC₅₀ = 18 nM in IKK-β complex assay • Selective over IKK-α, JNK and p38 MAPK • Inhibition of TNF-α production in human monocytes (IC₅₀ = 0.15–2.5 μM) • Blockade of IL-8 and IL-6 production by synovial fibroblasts (IC₅₀ = 0.1 μM) • Paw oedema reduction in rat arthritis model 	69–72
	Compound 6 Diarylpyridine derivative	<ul style="list-style-type: none"> • IC₅₀ = 0.6 μM for IKK-β • IC₅₀ = 20 μM for IKK-α • Inhibition of RANTES production in A549 cells (IC₅₀ = 7 μM) • Reduction of LPS-induced TNF-α production in mice (ED₅₀ = 2 mg per kg, ip) 	73–75
	Compound 7 Anilino-pyrimidine derivative	<ul style="list-style-type: none"> • IC₅₀ <0.5 μM for IKK-β • Inhibition of IκB degradation in cell-based assays • Block LPS-induced TNF-α production in mice (ED₅₀ 1–30 mg per kg) 	76
	Compound 8 Pyridoxazinone derivative	<ul style="list-style-type: none"> • Inhibition of IKK-β activity (IC₅₀ = 4 nM) • Reduction of cytokine production in cell assays • Blockade of LPS-induced TNF-α in acute model 	77

COX2, cyclooxygenase-2; ICAM-1, intercellular adhesion molecule-1; I κ B, inhibitor of NF- κ B; IKK, I κ B kinase; IL, interleukin; ip, intraperitoneal; LPS, lipopolysaccharide; NF- κ B, nuclear factor- κ B; RANTES, regulated upon activation, normally T-expressed, and presumably secreted; TNF, tumour-necrosis factor.

Table 2 | **Summary of selective IKK inhibitors in development**

Structure	Name	Comments	References
	Compound 9 Indolecarboxamide derivative	<ul style="list-style-type: none"> Inhibition of IKK activity (IC_{50} 0.05–32 μM) 	78
	Compound 10 Benzoimidazole carboxamide derivative	<ul style="list-style-type: none"> Inhibition of IKK activity (IC_{50} 0.07–70 μM) 	79
	Compound 11 Pyrazolo[4,3-c]quinoline derivative	<ul style="list-style-type: none"> IKK-β inhibitors (IC_{50} <1 μM) 	80,81
	Compound 12 Imidazolyquinoline-carboxaldehyde semicarbazide derivative	<ul style="list-style-type: none"> Selective against IKK-β (IC_{50} <30 μM) Reduction of TNF-α in LPS-challenged mice Efficacious in mouse arthritis model 	82
	Compound 13 Amino-imidazolecarboxamide derivative	<ul style="list-style-type: none"> IKK-β inhibitors 	83
	Compound 14 Pyridyl cyanoguanidine derivative	<ul style="list-style-type: none"> Antitumoral activity (Phase I/II evaluation) Inhibition of IκB phosphorylation 	84–88

I κ B, inhibitor of nuclear factor- κ B; IKK, I κ B kinase; LPS, lipopolysaccharide; TNF, tumour-necrosis factor.

mg per kg. BMS345541 also shows dose-dependent efficacy in terms of reducing disease severity in a murine model of collagen-induced arthritis⁶⁶. Interestingly, histopathological evaluation of various tissues, including liver, heart, lung and bone marrow of the mice treated with BMS345541 (six weeks of dosing at 100 mg per kg), revealed no toxicological changes⁶⁶.

More recently, Kishore and colleagues reported another IKK- β -selective inhibitor, SC-514 (compound 4)⁶⁷, which is similar to a group of amino-thiophenecarboxamides reported previously⁶⁸. This compound inhibits various forms of recombinant IKK- β with IC_{50} values of 3–12 μ M⁶⁷. Unlike BMS-345541, SC-514 is a reversible ATP competitive inhibitor. Although it binds IKK- β at the conserved ATP-binding pocket, SC-514 demonstrates good selectivity, in that it does not inhibit ~30 cellular protein kinases tested and has little effect on

other members of the IKK family, including IKK- α , IKK- γ and NIK *in vitro*⁶⁷. It is interesting to note that SC-514 inhibits expression of NF- κ B-dependent cytokines, such as IL-6 and IL-8, through the inhibition of IKK- β -mediated phosphorylation of I κ B- α and p65 (REF. 67). Although SC-514 has limited bioavailability (2%) and a poor half-life (0.2 hours), it is efficacious in acute inflammation model and blocks TNF- α production in LPS-challenged rats⁶⁷.

In addition, several other compounds have been reported as nanomolar-range inhibitors of IKK- β kinase activity, and have demonstrated inhibitory activity in functional cell-based assays and shown efficacy in experimental models. It is noteworthy that a group of ureidocarboxamido thiophenes^{69–71}, some of which inhibit IKK- β with an IC_{50} as low as 18 nM, were found to reduce paw oedema in a rat arthritis

model by 100% at a dose of 30 mg per kg (compound 5)⁷², indicating a potential use in the treatment of inflammatory disorders.

A recent report described the development of a group of 2-amino-3-cyano-4,6-diarylpyridines as selective IKK- β inhibitors^{73–75}. For example, compound 6 has an IC₅₀ of 0.6 μ M and 20 μ M against the I κ B- α kinase activity of IKK- β and IKK- α , respectively⁷⁵. When tested in an acute cytokine-release model (LPS-induced TNF- α in mice), this inhibitor demonstrated *in vivo* efficacy with an ED₅₀ of 2 mg per kg⁷⁵. In addition, Signal Pharmaceuticals disclosed a group of anilinoimidazole derivatives (compound 7) that inhibit IKK- β -mediated I κ B phosphorylation and block LPS-induced TNF- α production in mice with ED₅₀ values in the range 1–30 mg per kg⁷⁶.

More recently, a group of optically active pyridine analogues were reported to inhibit IKK- β activity⁷⁷. Compound 8 inhibits IKK- β with an IC₅₀ of 4 nM, demonstrates activity in cell-based assays, and reduces TNF- α production in acute mouse and rat models⁷⁷. As summarized in TABLES 1 and 2, a number of other small molecules with diversified structures have been disclosed (compounds 9–13)^{78–83}; however, no detailed information has been discussed in these disclosures.

It is interesting to note that CHS-828 (compound 14) and a group of related pyridyl cyanoguanidines were reported in a recent patent as IKK inhibitors^{84,85}. CHS-828 was originally identified and evaluated as an anti-tumoral agent in clinical trials^{86–88}. It is possible that CHS-828 and its analogues act by inhibiting IKK activity and blocking NF- κ B activation. These studies, taken together with results obtained with PS-1145 discussed above, provide a framework for considering the potential use of IKK- β inhibitors in cancer treatment.

However, the safety and efficacy profiles of these compounds remain to be determined, and until then it is not clear whether they can be used in the treatment of chronic inflammatory disorders.

Other approaches

In addition to efforts that focus on the design of specific small-molecule inhibitors, the use of macromolecules to block the activity or expression of IKKs has also been explored. These approaches include the use of antisense oligonucleotides that target the nucleic acid sequence of IKK- β to inhibit its expression and thereby prevent NF- κ B activation⁸⁹. Numerous recent reports have described the use of small interfering RNAs (siRNA) that modulate the expression of IKK proteins through RNA interference (RNAi); however, these approaches seem to be more suitable for mechanistic and target-validation studies than for therapeutic applications⁹⁰. In addition to antisense oligonucleotides and RNAi approaches, the development of cell-permeable peptides containing the IKK- γ -binding motif, which is located at the C termini of IKK- α and IKK- β , has also been reported^{89,90}. These peptides compete with IKK- α and IKK- β for binding to IKK- γ , thereby preventing assembly of the IKK complex and blocking activation of the canonical pathway. As expected, these peptides were shown to inhibit TNF- α -induced NF- κ B activation and reduce expression of NF- κ B-dependent genes in human endothelial cells^{91,92}.

In summary, given the recent progress in the development of IKK inhibitors there is much hope that one or several of these inhibitors will enter clinical testing and prove useful in either cancer therapy as an apoptosis-sensitizing drug or in the therapy of inflammatory and autoimmune diseases.

- Ghosh, S., May, M. J. & Kopp, E. B. NF- κ B and Rel proteins: evolutionarily conserved mediators of immune responses. *Annu. Rev. Immunol.* **16**, 225–260 (1998).
- Karin, M. & Ben-Neriah, Y. Phosphorylation meets ubiquitination: the control of NF- κ B activity. *Annu. Rev. Immunol.* **18**, 621–663 (2000).
- Solan, N. J., Miyoshi, H., Cammona, E. M., Bren, G. D. & Paya, C. V. RelB cellular regulation and transcriptional activity are regulated by p100. *J. Biol. Chem.* **277**, 1405–1418 (2002).
- Ghosh, S. & Karin, M. Missing pieces in the NF- κ B puzzle. *Cell* **109**, S81–S96 (2002).
- Rothwarf, D. M., Zandi, E., Natoli, G. & Karin, M. IKK- γ is an essential regulatory subunit of the I κ B kinase complex. *Nature* **395**, 297–300 (1998).
- Makris, C. *et al.* Female mice heterozygous for IKK- γ /NEMO deficiencies develop a dermatopathy similar to the human X-linked disorder incontinentia pigmenti. *Mol. Cell.* **5**, 969–979 (2000).
- Dejardin, E. *et al.* The lymphotoxin- β receptor induces different patterns of gene expression via two NF- κ B pathways. *Immunity* **17**, 525–535 (2002).
- Li, Q., Van Antwerp, D., Mercurio, F., Lee, K. F. & Verma, I. M. Severe liver degeneration in mice lacking the I κ B kinase 2 gene. *Science* **284**, 321–325 (1999).
- Li, Z. W. *et al.* The IKK β subunit of I κ B kinase (IKK) is essential for nuclear factor κ B activation and prevention of apoptosis. *J. Exp. Med.* **189**, 1839–1845 (1999).
- Chen, L. W. *et al.* The two faces of IKK and NF- κ B inhibition: prevention of systemic inflammation but increased local injury following intestinal ischemia-reperfusion. *Nature Med.* **9**, 575–581 (2003).
This paper demonstrates that the IKK- β ablation is a driving force for the initiation and maintenance of acute systemic inflammation.
- Hu, Y. *et al.* Abnormal morphogenesis but intact IKK activation in mice lacking the IKK α subunit of I κ B kinase. *Science* **284**, 316–320 (1999).
- Hu, Y. *et al.* IKK α controls formation of the epidermis independently of NF- κ B. *Nature* **410**, 710–714 (2001).
- Cao, Y. *et al.* IKK α provides an essential link between RANK signaling and cyclin D1 expression during mammary gland development. *Cell* **107**, 763–775 (2001).
- Yamamoto, Y., Verma, U. N., Prajapati, S., Kwak, Y. T. & Gaynor, R. B. Histone H3 phosphorylation by IKK- α is critical for cytokine-induced gene expression. *Nature* **423**, 655–659 (2003).
- Israel, A. Signal transduction: a regulator branches out. *Nature* **423**, 596–597 (2003).
- Senftleben, U. *et al.* Activation by IKK α of a second, evolutionarily conserved, NF- κ B signaling pathway. *Science* **293**, 1495–1499 (2001).
- Karin, M. & Lin, A. NF- κ B at the crossroads of life and death. *Nature Immunol.* **3**, 221–227 (2002).
- Barnes, P. J. & Karin, M. Nuclear factor- κ B — a pivotal transcription factor in chronic inflammatory diseases. *N. Engl. J. Med.* **336**, 1066–1071 (1997).
- Neurath, M. F. *et al.* Cytokine gene transcription by NF- κ B family members in patients with inflammatory bowel disease. *Ann. NY Acad. Sci.* **859**, 149–159 (1998).
- Luque, I. & Gelinas, C. Rel/NF- κ B and I κ B factors in oncogenesis. *Semin. Cancer Biol.* **8**, 103–111 (1997).
- Gilmore, T. D., Koedood, M., Pflatt, K. A. & White, D. W. Rel/NF- κ B/I κ B proteins and cancer. *Oncogene* **13**, 1367–1378 (1996).
- Haeflner, B. NF- κ B: arresting a major culprit in cancer. *Drug Discov. Today* **7**, 653–663 (2002).
- Alkalay, I. *et al.* Stimulation-dependent I κ B- α phosphorylation marks the NF- κ B inhibitor for degradation via the ubiquitin-proteasome pathway. *Proc. Natl Acad. Sci. USA* **92**, 10599–10603 (1995).
- Xiao, G. *et al.* Retroviral oncoprotein Tax induces processing of NF- κ B2/p100 in T cells: evidence for the involvement of IKK α . *EMBO J.* **20**, 6805–6815 (2001).
- Lenz, H. J. Clinical update: proteasome inhibitors in solid tumors. *Cancer Treat Rev.* **29** (Suppl. 1), 41–48 (2003).
- Kitagawa, M. *et al.* An F-box protein, FWD1, mediates ubiquitin-dependent proteolysis of β -catenin. *EMBO J.* **18**, 2401–2410 (1999).
- Winston, J. T. *et al.* The SCF- β TRCP ubiquitin ligase complex associates specifically with phosphorylated destruction motifs in I κ B β and β -catenin and stimulates I κ B α ubiquitination *in vitro*. *Genes Dev.* **13**, 270–283 (1999).
- Fuchs, S. Y., Chen, A., Xiong, Y., Pan, Z. Q. & Ronai, Z. HOS, a human homolog of Slimb, forms an SCF complex with Skp1 and Cullin1 and targets the phosphorylation-dependent degradation of I κ B and β -catenin. *Oncogene* **18**, 2039–2046 (1999).
- Rubinfield, B. *et al.* Stabilization of β -catenin by genetic defects in melanoma cell lines. *Science* **275**, 1790–1792 (1997).
- Morin, P. J. *et al.* Activation of β -catenin-Tcf signaling in colon cancer by mutations in β -catenin or APC. *Science* **275**, 1787–1790 (1997).
- Kopp, E. & Ghosh, S. Inhibition of NF- κ B by sodium salicylate and aspirin. *Science* **265**, 956–959 (1994).
- Pierce, J. W., Read, M. A., Ding, H., Lusinskas, F. W. & Collins, T. Salicylates inhibit I κ B α phosphorylation, endothelial-leukocyte adhesion molecule expression, and neutrophil transmigration. *J. Immunol.* **156**, 3961–3969 (1996).
- Yin, M.-J., Yamamoto, Y. & Gaynor, R. B. The anti-inflammatory agents aspirin and salicylate inhibit the activity of I κ B kinase- β . *Nature* **396**, 77–80 (1998).
This is the first study to provide evidence that IKK- β is a potential target for NF- κ B inhibition.

34. Yamamoto, Y., Yin, M.-J., Lin, K.-M. & Gaynor, R. B. Sulindac inhibits activation of the NF- κ B pathway. *J. Biol. Chem.* **274**, 27307–27314 (1999).
35. Berman, K. S. *et al.* Sulindac enhances tumor necrosis factor- α -mediated apoptosis of lung cancer cell lines by inhibition of nuclear factor- κ B. *Clin. Cancer Res.* **8**, 354–360 (2002).
36. Yasui, H., Adachi, M. & Imai, K. Combination of tumor necrosis factor- α with sulindac augments its apoptotic potential and suppresses tumor growth of human carcinoma cells in nude mice. *Cancer* **97**, 1412–1420 (2003).
37. Wahl, C., Liptay, S., Adler, G. & Schmid, R. M. Sulfasalazine: a potent and specific inhibitor of NF- κ B. *J. Clin. Invest.* **101**, 1163–1174 (1997).
38. Yan, F. & Polk, D. B. Aminosalicic acid inhibits I κ B kinase- α phosphorylation of I κ B α in mouse intestinal epithelial cells. *J. Biol. Chem.* **274**, 36631–36636 (1999).
39. Egan, L. J. *et al.* Inhibition of interleukin-1-stimulated NF- κ B RelA/p65 phosphorylation by mesalamine is accompanied by decreased transcriptional activity. *J. Biol. Chem.* **274**, 26448–26453 (1999).
40. Dredge, K., Dalgleish, A. G. & Marriott, J. B. Thalidomide analogs as emerging anti-cancer drugs. *Anticancer Drugs* **14**, 331–335 (2003).
41. Keifer, J. A., Guttridge, D. C., Ashburner, B. P. & Baldwin, A. S. Jr. Inhibition of NF- κ B activity by thalidomide through suppression of I κ B kinase activity. *J. Biol. Chem.* **276**, 22382–22387 (2001).
42. Majumdar, S., Lamothe, B. & Aggarwal, B. B. Thalidomide suppresses NF- κ B activation induced by TNF and H₂O₂, but not that activated by ceramide, lipopolysaccharides, or phorbol ester. *J. Immunol.* **168**, 2644–2651 (2002).
43. Mitsiades, N. *et al.* Apoptotic signaling induced by immunomodulatory thalidomide analogs in human multiple myeloma cells: therapeutic implications. *Blood* **99**, 4525–4530 (2002).
44. Gilroy, D. W. *et al.* Inducible cyclooxygenase may have anti-inflammatory properties. *Nature Med.* **5**, 698–701 (1999).
45. Ricote, M., Li, A. C., Willson, T. M., Kelly, C. J. & Glass, C. K. The peroxisome proliferator-activated receptor- γ is a negative regulator of macrophage activation. *Nature* **391**, 79–82 (1998).
46. Rossi, A. *et al.* Anti-inflammatory cyclopentenone prostaglandins are direct inhibitors of I κ B kinase. *Nature* **403**, 103–108 (2000).
47. Straus, D. S. *et al.* 15-deoxy- $\Delta^{12,14}$ -prostaglandin J₂ inhibits multiple steps in the NF- κ B signaling pathway. *Proc. Natl. Acad. Sci. USA* **97**, 4844–4849 (2000).
48. Lawrence, T., Gilroy, D. W., Colville-Nash, P. R. & Willoughby, D. A. Possible new role for NF- κ B in the resolution of inflammation. *Nature Med.* **7**, 1291–1297 (2001).
49. Bowie, A. G. & O'Neill, L. A. Vitamin C inhibits NF- κ B activation by TNF via the activation of p38 mitogen-activated protein kinase. *J. Immunol.* **165**, 7180–7188 (2000).
50. Carcamo, J. M., Pedraza, A., Borquez-Ojeda, O. & Golde, D. W. Vitamin C suppresses TNF α -induced NF- κ B activation by inhibiting I κ B α phosphorylation. *Biochemistry* **41**, 12995–13002 (2002).
51. Tsai, S. H., Liang, Y. C., Lin-Shiau, S. Y. & Lin, J. K. Suppression of TNF α -mediated NF- κ B activity by myricetin and other flavonoids through downregulating the activity of IKK in ECV304 cells. *J. Cell Biochem.* **74**, 606–615 (1999).
52. Holmes-McNary, M. & Baldwin, A. S. Jr. Chemopreventive properties of trans-resveratrol are associated with inhibition of activation of the I κ B kinase. *Cancer Res.* **60**, 3477–3483 (2000).
53. Berlett, B. S. & Stadtman, E. R. Protein oxidation in aging, disease, and oxidative stress. *J. Biol. Chem.* **272**, 20313–20316 (1997).
54. Hayakawa, M. *et al.* Evidence that reactive oxygen species do not mediate NF- κ B activation. *EMBO J.* **22**, 3356–3366 (2003).
55. Sakon, S. *et al.* NF- κ B inhibits TNF-induced accumulation of ROS that mediate prolonged MAPK activation and necrotic cell death. *EMBO J.* **22**, 3898–3909 (2003).
56. Blackwell, T. S., Blackwell, T. R., Holden, E. P., Christman, B. W. & Christman, J. W. *In vivo* antioxidant treatment suppresses nuclear factor- κ B activation and neutrophilic lung inflammation. *J. Immunol.* **157**, 1630–1637 (1996).
57. Anest, V. *et al.* A nucleosomal function for I κ B kinase- α in NF- κ B-dependent gene expression. *Nature* **423**, 659–663 (2003).
58. Signal Pharmaceuticals, Inc. Quinazoline analogs and related compounds and methods for treating inflammatory conditions. WO 199901441 (1999).
59. Leisten, J. C. *et al.* Identification of a disease modifying IKK2 inhibitor in rat adjuvant arthritis. *Inflamm. Res.* **51** (Suppl. 2), A25 (2002).
60. Palanki, M. S. *et al.* Structure–activity relationship studies of ethyl 2-[3-methyl-2,5-dioxo(3-pyrrolyl)amino]-4-(trifluoromethyl)pyrimidine-5-carboxylate: an inhibitor of AP-1 and NF- κ B mediated gene expression. *Bioorg. Med. Chem. Lett.* **12**, 2573–2577 (2002).
61. Aventis Pharma. Preparation of substituted β -carbolines as potential therapeutics in diseases associated with increased I κ B kinase activity. WO 2001068648 (2001).
62. Castro, A. C. *et al.* Novel IKK inhibitors: β -carbolines. *Bioorg. Med. Chem. Lett.* **13**, 2419–2422 (2003).
63. Hideshima, T. *et al.* NF- κ B as a therapeutic target in multiple myeloma. *J. Biol. Chem.* **277**, 16639–16647 (2003).
- This paper reports the use of small-molecule inhibitors of IKK- β to prevent NF- κ B activation, and its therapeutic role in inhibiting the growth of the haematological cancer multiple myeloma.**
64. Bristol-Myers Squibb Co. Method of treating inflammatory and immune diseases using 4-amino substituted imidazoquinoxaline, benzopyrazoloquinazoline, benzoimidazoquinoxaline and benzoimidazoquinoline inhibitors of I κ B kinase (IKK). WO 2002060386 (2002).
65. Burke, J. R. *et al.* BMS-345541 is a highly selective inhibitor of I κ B kinase that binds at an allosteric site of the enzyme and blocks NF- κ B-dependent transcription in mice. *J. Biol. Chem.* **278**, 1450–1456 (2003).
66. McIntyre, K. W. *et al.* A highly selective inhibitor of I κ B kinase, BMS-345541, blocks both joint inflammation and destruction in collagen-induced arthritis in mice. *Arthritis Rheum.* **48**, 2652–2659 (2003).
67. Kishore, N. *et al.* A selective IKK-2 inhibitor blocks NF- κ B-dependent gene expression in IL-1 β stimulated synovial fibroblasts. *J. Biol. Chem.* **278**, 32861–32871 (2003).
- References 65 and 67 focus on the therapeutic potential of small-molecule inhibitors of IKK- β for the treatment of inflammation. The molecule in reference 65 is an allosteric site inhibitor of IKK- β , whereas reference 67 reports the development of an ATP-competitive inhibitor of IKK- β .**
68. SmithKline Beecham Corp. Preparation of 2-amino-thiophene-3-carboxamides as NF- κ B inhibitors. WO 2002030353 (2002).
69. SmithKline Beecham Corp. NF- κ B inhibitors. WO 2003029242 (2003).
70. AstraZeneca. Preparation of ureido-carboxamido thiophene as inhibitors of IKK2 kinase. WO 2003010163 (2003).
71. AstraZeneca. Preparation of thiophenecarboxamides as inhibitors of the enzyme IKK-2. WO 2001058890 (2001).
72. Roshak, A. K. *et al.* A small molecule inhibitor of I κ B kinase β (IKK β) blocks inflammation and protects joint integrity in *in vivo* models of arthritis. *Inflamm. Res.* **51** (Suppl. 2), S4 (2002).
73. Bayer. Preparation of 2,4-diarylpyridines as I κ B kinase β inhibitors useful as antiinflammatories. WO 2002044153 (2002).
74. Bayer. Preparation of hydroxyarylpyridines with I κ B kinase β (IKK) inhibiting activity. WO 2002024679 (2002).
75. Murata, T. *et al.* Discovery of novel and selective IKK- β serine-threonine protein kinase inhibitors. Part 1. *Bioorg. Med. Chem. Lett.* **13**, 913–918 (2003).
76. Signal Pharmaceuticals, Inc. Preparation of anilinothiopyridines as IKK inhibitors. WO 2002046171 (2002).
77. Bayer. Preparation of optically active pyridooxazinones as antiinflammatory agents. WO 2003076447 (2003).
78. Aventis Pharma. Preparation of amino acid indolecarboxamides as modulators of NF κ B activity. WO 2001030774 (2001).
79. Aventis Pharma. Preparation of benzimidazolecarboxylic acid amino acid amides as I κ B kinase inhibitors. WO 2001000610 (2001).
80. Pharmacia Corp. Preparation of pyrazolo [4,3-c]quinolines, chromeno [4,3-c] pyrazoles, and analogs for treatment of inflammation. WO 2003024936 (2003).
81. Pharmacia Corp. Preparation of 4,5-dihydro-1H-benzogljindazole-3-carboxamides for treatment of inflammation. WO 2003024935 (2003).
82. Tularik Inc. Preparation of imidazolylquinolinecarboxaldehyde semicarbazones as IKK modulators. WO 2002041843 (2002).
83. SmithKline Beecham Corp. Preparation of 5-amino-1H-imidazole-4-carboxamides as NF- κ B inhibitors. WO 200230423 (2002).
84. Leo Pharma. A method using cyanoguanidine compounds for modulating NF κ B activity and use for the treatment of cancer. WO 2002094265 (2002).
85. Leo Pharma. Antitumor drug-cyanoguanidine IKK inhibitor combination. WO 2002094322 (2002).
86. Schou, C. *et al.* Novel cyanoguanidines with potent oral antitumor activity. *Bioorg. Med. Chem. Lett.* **7**, 3095–3100 (1997).
87. Hjarmaa, P. J. *et al.* CHS 828, a novel pyridyl cyanoguanidine with potent antitumor activity *in vitro* and *in vivo*. *Cancer Res.* **59**, 5751–5757 (1999).
88. Martinsson, P. *et al.* The combination of the antitumoural pyridyl cyanoguanidine CHS 828 and etoposide *in vitro* – from cytotoxic synergy to complete inhibition of apoptosis. *Br. J. Pharmacol.* **137**, 568–573, (2002).
89. Isis Pharmaceuticals, Inc. Antisense modulation of Inhibitor- κ B kinase β gene expression WO 2000031105 (2000).
90. Takaes, G. *et al.* TAK1 is critical for I κ B kinase-mediated activation of the NF- κ B pathway. *J. Mol. Biol.* **326**, 105–115 (2003).
- This study reports the first demonstration of RNAi-based gene silencing of the IKK proteins and further establishes the role of TAK1, IKK- α and IKK- β on TNF- α and IL-1 activation of the NF- κ B pathway.**
91. May, M. J. & Ghosh, S. Anti-inflammatory compounds and uses thereof. A cell-permeable peptide encompassing NEMO binding domain of I κ B kinase was able to not only inhibit TNF α -induced NF- κ B activation but also reduce expression of E-selectin, an NF- κ B-dependent target gene, in primary human endothelial cells. WO 2002156000 (2002).
92. May, M. *et al.* Selective inhibition of NF- κ B activation by a peptide that blocks the interaction of NEMO with the I κ B kinase complex. *Science* **289**, 1550–1554 (2000).
- This study reports on the identification of the NEMO binding domain (NMD) of IKK- β and the potential use of an NMD peptide to block activation of the NF- κ B pathway.**

Competing interests statement
 The authors declare that they have no competing financial interests.

Online links

DATABASES
The following terms in this article are linked online to:
LocusLink: <http://www.ncbi.nlm.nih.gov/LocusLink/c-FLIP> | ICAM-1 | IKK- α | IKK- β | IKK- γ | IL-6 | NF- κ B1 | NF- κ B2 | PPAR- γ | RANK | Rel | RelA | RelB | TBK1 | TNFR1 | VCAM-1 | VEGF
Online Mendelian Inheritance in Man:
<http://www.ncbi.nlm.nih.gov/Omim/>
 Inflammatory bowel disease
Access to this interactive links box is free online.